Professional Licensing Agency 402 West Washington Street Room W072 Indianapolis, IN 46204



Michael R. Pence Governor of Indiana Deborah J. Frye PLA Executive Director

Dental Controlled Substance Registration Renewal

Your dental controlled substance registration in the state of Indiana expires on March 1, 2014. You may renew your registration online at www.pla.in.gov. To renew by mail, please print and complete this document in its entirety and submit it with the renewal fee of \$60 to the office address shown above. Make check or money order payable to 'Indiana Professional Licensing Agency'. If this document is postmarked after March 1, 2014 you must include a \$50 late fee. Allow at least 4 weeks for the processing of this paper document. If you answer 'Yes' to any question below send a detailed statement regarding the response with your renewal. You must print and complete a renewal for each CSR you would like to renew.

LICENSEE INFORMATION: Update address, if needed, and provide a current phone number and email address						
Enter Licensee Name	Enter CSR Num	nber	Expiration Date	Renewal Fee		
			3/1/2014	9	60.00	
Street Address						
City	State		Zip Code			
Phone Number	Email Address					
QUESTIONS						
1. Since you last renewed, and except for minor violations of traffic laws resulting in fines and arrests or convictions that have been expunged by a court, have you been arrested, entered into a diversion agreement, been convicted of, pled guilty to, or pled nolo contendere to any offense, misdemeanor, or felony in any state?					YES NO	
2. Since you last renewed have you had any action, discipline or revocation on your DEA (U. S. Drug Enforcement administration) registration or entered into a Memorandum of Understanding (MOU) on said registration?					YES NO	
LICENSEE AFFIRMATION						
I hereby swear or affirm under the penalties of perjury that I understand the State Board of Dentistry statutes and rules and have answered the questions true to the best of my knowledge.						
Signature of Licensee		Date (month	n, day, year)			

Visit us on the web at www.pla.in.gov for additional information regarding your licensure, including CE requirements and name change requests or email the Board at pla8@pla.in.gov.

FOR OFFICE USE ONLY				
Renewal Fee	Receipt No.	Date		